

## Page 1 of 1

All amounts are calculated in domestic currency.

Grouped by Vendor ID

Purchase Order ID/ Curr Type	Line Nbr/ Insp Req	Project ID	Reference/ Description/ Cert Std	PO U/M / Stock U/M	Required Date Required Qty	Recv Date/ Recv Emp	Recv Qty (PO U/M)	Cost Per Unit/ Recv Value	Inspected Qty/ Rejected Qty (PO U/M)	MRB Qty/ MRB Reject Qty	Book Amt
VendorID/Vendor Name		VC-GEP001	SABIC Polymershapes								
PO17566	2		MUHMWB10	sf	7/31/2012	7/31/2012	40.0000	\$19.89	0.0000	0	\$795.64
CAD	No		UHMW 1" Black	sf	40.0000	DESJ02		\$795.64	0.0000	0	
			122575								
Total Received Quantity:											40.0000
Total Qty to Inspect (PO U/M):											0.0000
Total Reject Quantity:											0.0000
Total Receipt Value:											\$795.64
Total Balance Due Quantity:											0.0000

# Receiving Report

Date: 12/7/31  
Supplier: SABIC

Batch No: M122578  
Dart P/O: 17566

Packing Slip: Yes ☒ No ☐  
Invoice: Yes ☐ No ☒  
Receipt: Cash ☐ Cr ☒

Release Note Attached: Yes ☒ No ☐ N/A ☐  
Waybill Attached: DA5 Yes ☒ No ☐  
Shipment Complete: 12/07/31 Yes ☒ No ☐ N/A ☐  
QC6 Inspection 16 12/07/31 DA5 N/A ☐  
Work Order 16 N/A ☒

## Discrepancies

Part Number	Description	Quantity Ordered	Quantity Received	Quantity Returned	Quantity Short	Comments
<u>MWH MW 320</u>		<u>360</u>	<u>0</u>	<u>0</u>	<u>360</u>	

Initials of receiver (if shipment OK) Level 12 [Signature]

Production/Admin: 12/7/31  
Date  
Received/Costing  
Initial [Signature]

Location \_\_\_\_\_

\*\*\* SHIPPER \*\*\*

A/C 10.39

SABIC Polymershapes  
1250 Old Innes Rd., Unit 519

Ottawa, Ontario K1B 5L3  
PST 85637 2750 TR0001  
PHONE: (613)745-7043 FAX: (613)745-4291

Page: 1

SOLD TO: DART AEROSPACE LTD

SHIP TO: DART AEROSPACE LTD

1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
Canada

1270 ABERDEEN STREET  
HAWKESBURY ON K6A 1K7  
Canada  
1-613-632-5200

Our Order No	Customer	GST License	PST License	Invoice Terms	Ordered	Shipped	Taken By	RDD
002961	DARAER	CHARGE GST	6112-5207	NET 30 DAYS	30.07.12		dixonw	30.07.12
Ship.Doc.No	Salesrep	Customer P.O.#	Shipped Via	F.O.B.	Freight Terms	Inv. No.	Ship Date	
01	93	17555	T S T		COLLECT		17.08.12	

Ln#	Location	Ord	B/O	Ship Sku	Product Code	Description	U/Price
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\*\*\*\*\*  
DELIVERIES TO BE DONE BEFORE  
4:00 PM , ADVISE SHIPPING CO.  
\*\*\*\*\*

001	A6	9	9	0 SHT	93314755	TIVAR 1000 PLATE - BLACK 1.000 X 48 X 120 - +.020/	
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002	A6	1	1	0 SHT	93314755	TIVAR 1000 PLATE - BLACK 1.000 X 48 X 120 - +.020/	
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Ship the one (1) sheet today

004		1	0	1 EA	0000005	THANK YOU FOR SELECTING SABIC POLYMERSHAPES	
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DAS  
14  
9-89 12/07/31

LINE No.	RECEIVING No.	PICKED BY	DATE	SHIPPED BY	DATE	VERIFIED	DATE
					12/11/12		

NO GOODS TO BE RETURNED WITHOUT APPROVAL FROM SABIC. ALL DISCREPANCIES MUST BE REPORTED WITHIN 10 DAYS  
ALL RETURNS MUST HAVE VALID RETURNED GOODS AUTHORIZATION NUMBER CLEARLY MARKED ON ALL PACKAGES.

## CERTIFICATE OF COMPLIANCE

SOLD TO: Dart Aerospace.

DATE: July 30, 2012

YOUR PURCHASE ORDER: 17566

SABIC INVOICE NO: O102393

SABIC SALES ORDER NO: O02961

SABIC POLYMERSHAPES LINE ITEM # 002

QUANTITY: One (1) 48" x 120" Sheets

DESCRIPTION: Tivar 1000 Plate – Black 1.00" Thick 48" x 120" Sheets

The above material is manufactured in accordance with ASTM D4020-05 with a molecular weight of 3.0 to 6.2 Million G/Mol.

This is to certify that the material finishes and functional requirements of the above are in accordance with the reference procurement specifications, control drawings or parts designation and latest revisions as referenced on the purchase order.

AUTHORIZED REPRESENTATIVE SIGNATURE

*Wade Dixon*

Wade Dixon

68-88  
14  
DAS  
12/07/31



Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO17566

Purchase Order Date 7/30/12

PO Print Date 7/30/12

Page Number 1 of 1

Order From :

VC-GEP001

SABIC POLYMERSHAPES  
C/O T08722C/U  
PO BOX 8722 STN A  
TORONTO, ON M5W 3C2  
CA

Contact Name

Vendor Phone 800 267 1575

Vendor Fax 613 745 4291

Vendor Account Nbr

Buyer

Linda Lacelle

Requisition Nbr

Tax Resale Nbr 10127-2607

Terms

Net 30

Currency

CAD

FOB

Destination-Collect

Ship To :

DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

Line Nbr	Reference Revision ID Vendor Part Number	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	MUHMWB10	UHMW 1" Black	8/10/12 Yes	360.00 sf	Yours ppd	\$20.2700	\$7,297.20

Special Inst: UHMW BLACK TIVAR 1000 VIRGIN  
MATERIAL  
MANUFACTURER: POLY HI  
SOLDUR/QUADRANT PLASTICS  
THICKNESS TOLERANCE: +0.030/NO  
MINUS

2	MUHMWB10	UHMW 1" Black	7/31/12 Yes	40.00 sf	Yours ppd	\$20.2700	\$810.80
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Special Inst: AS ABOVE  
PLEASE SHIP THIS ONE SHEET TODAY!!

PO Total:

\$8,108.00

Change Nbr: 1

Change Date: 7/30/12

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required - YES NO

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
<b>Root Cause</b>	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube			<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions			<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other		

**TST Overland Express**  
ExpressLINK

P.O. Box 3030, Station A, Mississauga, Ontario L5A 3S3  
G.S.T.# 144612488  
Overland Western International Inc.(OVEA)  
3091 Rockefeller Avenue, Cleveland, Ohio 44115-3611

Carrier Code  
Code du Transp.

**2153**



736-3862929 1

Division of TST Solutions L.P.  
Une division de TST Solutions L.P.  
DUNS No. 242146401 (OVLD)

P/U Trailer - Unite Cuell

L/H Trailer - Unite Route

959313

0009020

NS

7 30 12

Manifest From - Manifest de  
Consignee - Consignataire

To - À

Bill of Lading No. - N° Connaissement

Purchase Order No. - N° de Commande

DART AEROSPACE LTD  
1270 ABERDEEN STREET  
HAWKESBURY, ON K6A 1K7

Shipper - Expéditeur

SABIC POLYMERSHAPES  
1250 OLD INNES RD UNIT 519  
OTTAWA, ON K1B 5L3

Origin

Dest.

C.D.

OTT MTL 1

Declared Value - Valeur déclarée

Type - Genre %Tr. - %Rem. Page

STD 0 01

Bill To - Facturer à

Origin Carrier - Premier Transporteur

O/C Pro No. - N° Facture P/T

M

D J

Beyond Carrier - Transporteur subs.

S.R.

Amount - Montant

Pieces - Coils H.M.

Description

Weight - Poids

Rate - Taux

Charges - Frais

1

SKD SHT TIVAR BLACK  
SO# 002961  
23.7 CFT  
122X48X7  
FUEL SURCHARGE  
Printed on 07/31/2012 @ 07:08  
\*\* COLLECT \*\*

250

COLLECT

COLLECT

Total Pieces  
Coils total

GST# 144612488

Total Weight  
Poids total

250

Total Charges  
Frais totaux

COLLECT

E & OE

Print Last Name

A TransForce Company

SNW INTACT

☐ YES ☐ NO

Connecting Carrier Please - Protect this Amount

Au transporteur suivant - Frais à protéger

Any loss or damage must be noted on pro bill at time of delivery,  
otherwise consignee's signature will constitute clear receipt.  
Toutes pertes ou dommages doivent être notés sur le connai-  
sement au moment de la livraison, autrement la signature du  
consignataire constituera un reçu final.

C.O.D.  
Total  
P.S.L.

Cash or Certified Cheque Only - Driver Collect This Amount

Chèque visé ou argent comptant seulement - à percevoir par le chauffeur

X  
Received in Apparent Good Order - Reçu sans Avoir Apparente

Date

31-07-12

Time In  
Time Out

Unit - Unite

Driver - Chauffeur

Terms: Net 7 Days, Overdue Balance Subject to Interest Charges  
Conditions: 7 jours, compte en Souffrance Sujet à Intérêts

Signature Copy - Copie de Signature

OEO-0981 04/06

## EXPRESS LINKS

Carrier Code  
Code du Transp.

1

050-0981 04/06